



STATE OF RHODE ISLAND
DEPARTMENT OF HUMAN SERVICES
Celia Blue, Interim Director
57 Howard Avenue, Cranston, Rhode Island 02920



**PUBLIC RECORDS REQUEST FORM UNDER
THE ACCESS TO PUBLIC RECORDS ACT**

Date _____

Name (optional) _____

Address (optional) _____

Telephone (optional) _____

E-Mail Address (optional) _____

Requested Records: _____

Forward this document to the Department of Human Services - [ATTN: Linda Shumate or Justine Fitzpatrick](#)

Email: DHS.Contact@dhs.ri.gov
Cranston, RI 02920

Fax: 401-462-6594

By Mail: 25 Howard Ave,

If, after review of your request, the Department determines that the requested records are exempt from disclosure for a reason set forth in the Access to Public Records Act, the Department reserves its right to claim such exemption.

Note: If you choose to pick up the records but did not include identifying information on this form (name, etc.), please contact Linda Shumate or Justine Fitzpatrick at DHS.Contact@dhs.ri.gov or (401) 462-2121 with the date you made the request and the records requested. Thank you.